FEC FORM 2 (REV. 02/2009)

## 201612130200778042

## FEC FORM 2 STATEMENT OF CANDIDACY

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						<u> </u>	nec.	13	가 2: 37
(a) Name of Candidate (in full) Franken, Al, , ,			· · ·						
(b) Address (number and street) P.O. Box 583144	Check	if address char	nged		2. Candidate S8MN00		dentific	ation N	umber
(c) City, State, and ZIP Code Minneapolis		MN	55458		3. Is This Stateme		New (N)	OR	X (A)
Party Affiliation 5. DEMOCRATIC-FARM-LABOR	Office Sought Senate		6.	State & Dist	rict of Candida 00		•		
DES	IGNATION C	F PRINCIP	PAL C	AMPAIG	N COMMIT	TEE			
I hereby designate the following name	d political commit	tee as my Princ	cipal Car	npaign Com	mittee for the _ (	2020 year of c	election	_ election)	on(s).
NOTE: This designation should be file	d with the approp	riate office liste	d in the	instructions.	<u> </u>				
(a) Name of Committee (in full)  Al Franken for Senate	· •		··· (* )	,					
(b) Address (number and street) P.O. Box 583144			· ·	3 -	· .				
(c) City, State, and ZIP Code	- ; -			. •					<u>.</u>
Minneapolis			٠,	MN	55458				
I hereby authorize the following name candidacy.					mmittee, to rec	eive and	i expen	d funds	on behalf of my
NOTE: This designation should be file	d with the princip	al campaign co	mmittee						
(a) Name of Committee (in full) Franken MVPs			:		•				
(b) Address (number and street) PO Box 583144	• .								
(c) City, State, and ZIP Code	<u> </u>	··········			<u> </u>				
Minneapolis		,		MN	55458				
I certify that I have exam	nined this Stateme	ent and to the b	est of m	/ knowledge	and belief it is t	rue, cor	rect an	d compl	ete.
Signature of Candidate Franken, Al.,	ruhn				Date 12/07/201	6			
NOTE: Submission of false, erroneous, o	or incomplete info	rmation may su	bject the	person sign	ing this Statem	ent to D	enalties	of 2 U.	S.C. §437g.
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